

(Family name) <b>ERNSTSONS</b>	(First name) <b>Janis</b>	(Middle name) <b>Arnolds</b>	<input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	BIRTHDATE (Mo.-Day-Yr.) <b>10/28/1909.</b>	NATIONALITY <b>Stateles</b>	ALIEN REGISTRATION NO. (If any) <b>A 7452723.</b>
ALL OTHER NAMES USED <b>None.</b>			CITY AND COUNTRY OF BIRTH <b>Liepaja L A T V I A</b>		SOCIAL SECURITY NO. <b>553-11-3189</b>	
FAMILY NAME <b>ERNSTSONS</b>		FIRST NAME <b>Pricis</b>	DATE, CITY AND COUNTRY OF BIRTH (If known) <b>unknown</b>		CITY AND COUNTRY OF RESIDENCE <b>Liepaja - LATVIA</b>	
FATHER <b>STRAUMINS</b>	MOTHER (Maiden name) <b>Marija.</b>					
HUSBAND (If none, so state) OR WIFE <b>Widow: VITOLS</b>	FAMILY NAME (For wife, give maiden name) <b>KESSELS</b>	FIRST NAME <b>Eugene</b>	BIRTHDATE <b>9/10/12</b>	CITY & COUNTRY OF BIRTH <b>St. Petersburg Russia</b>	DATE OF MARRIAGE <b>Oct. 26th 1966</b>	PLACE OF MARRIAGE <b>S.F.</b>
FORMER HUSBANDS OR WIVES (If none, so state) FAMILY NAME (For wife, give maiden name) <b>Bredzs</b>		FIRST NAME <b>Helena</b>	BIRTHDATE <b>6/16/14</b>	DATE & PLACE OF MARRIAGE <b>Sept. 15th. 40. Tirava, LATVIA.</b>	DATE AND PLACE OF TERMINATION OF MARRIAGE <b>October 20th. 1966 San Francisco.</b>	
APPLICANT'S RESIDENCE LAST FIVE YEARS. LIST PRESENT ADDRESS FIRST.						
STREET AND NUMBER <b>289 Graystone Terrace</b>		PROVINCE OR STATE <b>S.F.</b>	COUNTRY <b>California</b>	FROM MONTH <b>Oct.</b> YEAR <b>66</b>	TO MONTH <b>PRESENT TIME</b> YEAR <b>72</b>	
Show below last foreign residence of more than one year if not shown above. (Include all information requested above.)						
<b>D.P. Transit Camp.</b>		<b>Wentorf</b>	<b>Hamburg</b>	<b>Germany</b>	<b>Febr. 49</b>	<b>March 50.</b>
APPLICANT'S EMPLOYMENT LAST FIVE YEARS. (If none, so state.) LIST PRESENT EMPLOYMENT FIRST.						
FULL NAME AND ADDRESS OF EMPLOYER <b>Latvian Lutheran Church of Northern California, 425 Hoffman Ave, San Francisco</b>			OCCUPATION (SPECIFY) <b>Pastor</b>	FROM MONTH <b>Sept. 1950.</b> YEAR <b>50.</b>	TO MONTH <b>PRESENT TIME</b> YEAR <b>72</b>	
Show below last occupation abroad if not shown above. (Include all information requested above.)						
<b>D.P. Transit Camp</b>		<b>Wentorf</b>	<b>Hamburg</b>	<b>Germany.</b>	<b>Febr. 49</b>	<b>March 50.</b>
THIS FORM IS SUBMITTED IN CONNECTION WITH APPLICATION FOR: <input checked="" type="checkbox"/> NATURALIZATION <input type="checkbox"/> ADJUSTMENT OF STATUS <input type="checkbox"/> OTHER (SPECIFY):			SIGNATURE OF APPLICANT OR PETITIONER <b>Arnolds Ernstson</b> DATE <b>JUN 22 1972</b>			
Are all copies legible? <input checked="" type="checkbox"/> Yes			IF YOUR NATIVE ALPHABET IS IN OTHER THAN ROMAN LETTERS, WRITE YOUR NAME IN YOUR NATIVE ALPHABET IN THIS SPACE:			

PENALTIES: SEVERE PENALTIES ARE PROVIDED BY LAW FOR KNOWINGLY AND WILLFULLY FALSIFYING OR CONCEALING A MATERIAL FACT.

COMPLETE THIS BOX (Family name) <b>ERNSTSONS</b>	(Given name) <b>Janis</b>	(Middle name) <b>Arnolds.</b>	(Alien registration number) <b>A 7452723.</b>
(OTHER AGENCY USE)  <b>FOR COORDINATION WITH <u>INS</u></b>		INS USE (Office of Origin)  <b>SFR</b> <b>NATURALIZATION</b> <b>Date: JUN 22 1972</b>	
(3) C.			

NAZI WAR CRIMES DISCLOSURE ACT

EXEMPTIONS Section 3(b)

- (1)(A) Privacy ☐  
(1)(B) Methods/Sources ☒  
(1)(C) Foreign Relations ☐

Reviewed and Approved for Release  
by the Central Intelligence Agency  
Date: 2004 2005